Effective October 1, 2003						10689308			
	-> CLAIM		ED - PART	1	***			0/	208
TOTAL CLA	OMIC	(c	(Column 1) (Column 2)			L ENTITY		OTHER THAN	
·	KIIVES .				TYPE		- 01	SMAL	LENTIT
FOR		NU	MBER FILED	RAT			E	RATE	
TOTAL CHARGEABLE CLAIMS		MS		NUMBER EXTRA	BASIC	FEE 385.	00 OF	BASIC FE	
NDEPENDENT CLAIMS			minus 20=		X\$ 9	=	OR	X\$18=	-
MULTIPLE DEPENDENT CLAIM PR		14 8888.5	minus 3 =		X43:				-
		· ·					OR	X86=	· ·
If the differe	ence in column	1 is less th	an zero, enter	"0" in column 2	+145:	= .	O.R	+290=	
	CLAIMS A	S AMFNI	DED - PART	• **	TOTAL		OR	TOTAL	
7	Column	1)	(Colum					OTHER	THAN
1	CLAIMS REMAININ	G .	HIGHE	ST	SMALI	LENTITY		SMALL	ENTITY
	AFTER AMENDME	VT	PREVIOU	ISLY EVIDA	RATE	ADDI- TIONA		DATE	ADDI-
Total	. 34	Minus	PAID FO	71		FEE	1 1	RATE	TIONAL FEE
Independen	, —	Minus			X\$ 9=		OR	X\$18=	
FIRST PRE	SENTATION OF	MULTIPLE	DEPENDENT C	LAIM []	X43≈		OR	X86=	
		`			+145=		7 - 1-		
					TOTAL	 	OR	+290=	
·	(Column 1		(Column		ADDIT FEE	L	OR AL	DOIT, FEE	
	REMAINING AFTER		HIGHES NUMBER	DOSOS		ADDI-	T		
	AMENDMENT	r	PREVIOUS PAID FOR	LY EXTRA	RATE	TIONAL		DATE	ADDI-
Total	•	Minus	##	<u> </u>	-	FEE		RATE	FEE
Independent	*	Minus	AAA	=	X\$ 9=	·	OR)	<\$18≟	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					X43≃		OR	X86≃	
	•			· · · · · · · · · · · · · · · · · · ·	+145=		**\ 		
	,	•			TOTAL			290=	
· · · · ·	(Column 1)		(Column 2		ADDIT. FEE	l	OR ADD	TOTAL DIT. FEE	
	CLAIMS . REMAINING		HIGHEST	(Column 3)					
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otal	*	Minus	PAID FOR	EXTRA	RATE T	TONAL FEE	. R	ATE TI	ONAL
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			=	V4C		OF X	10=		
					X43=	0	A X	86=	
ne entry in column 1 is less than the entry in column 2, write "0" in column 3. 16 "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." 2 "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."					+145=	0	R +2	90=	
					TOTAL		<u> </u>		
י יישויפאז זאטורה!	ber Previously Pak	For (Total o	I Independent in t	nan 20, enter *20,* han 3, enter *3.* he highest number to	ADDITION FEE		ADDI	FEE	